

## General

### Title

Bioethics: percentage of indications to limit life support that fulfill the criteria.

### Source(s)

Quality indicators in critically ill patients. Madrid (Spain): Spanish Society of Intensive and Critical Care and Units Coronary (SEMICYUC); 2011. 185 p.

## Measure Domain

### Primary Measure Domain

Clinical Quality Measures: Process

### Secondary Measure Domain

Does not apply to this measure

## Brief Abstract

### Description

This measure is used to assess the percentage of indications to limit life support that fulfill the criteria.

### Rationale

The aim of intensive care medicine is to provide critical patients with the healthcare that they need, ensuring the quality and safety of care. Intensive care medicine is one of the principal components of modern healthcare systems. There is an increasing demand for this resource, which involves high costs.

The quality of care has gradually come to be the central focus of healthcare, and in recent years patient safety has come to represent one of the key aspects of quality. In the case of intensive care medicine, this interest in quality is even more evident, not only because of its social and economic impact, but also because some of the dimensions involved in the quality of care of critical patients take on greater importance: critical patients are more vulnerable, access to critical care is more limited so efforts to distribute resources equitably are more important, scant scientific evidence is available, and the efficiency is limited.

The aim of limiting life support is to avoid suffering caused by futile treatment. Life support is limited in a significant percentage of critical care patients. The decision to forgo life support should never be taken individually, rather certain essential criteria, both scientific and consensual, must be met.

## Evidence for Rationale

Cabr   L, Mancebo J, Solsona JF, Saura P, Gich I, Blanch L, Carrasco G, Mart  n MC, Bioethics Working Group of the SEMICYUC. Multicenter study of the multiple organ dysfunction syndrome in intensive care units: the usefulness of Sequential Organ Failure Assessment scores in decision making. *Intensive Care Med.* 2005 Jul;31(7):927-33. [PubMed](#)

Cabr   L, Solsona JF, y grupo de trabajo de bio  tica de la SEMICYUC. Limitaci  n del esfuerzo terap  utico en Medicina Intensiva. *Med Intensiva.* 2002;26:304-11.

Esteban A, Gordo F, Solsona JF, Al  a I, Caballero J, Bouza C, Alcal  i-Zamora J, Cook DJ, Sanchez JM, Abizanda R, Mir   G, Fern  ndez Del Cabo MJ, de Miguel E, Santos JA, Balerdi B. Withdrawing and withholding life support in the intensive care unit: a Spanish prospective multi-centre observational study. *Intensive Care Med.* 2001 Nov;27(11):1744-9. [PubMed](#)

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## Primary Health Components

Bioethics; life support

## Denominator Description

Number of indications for total limitation of life support (see the related "Denominator Inclusions/Exclusions" field)

## Numerator Description

Number of indications to limit life support that fulfill the criteria (see the related "Numerator Inclusions/Exclusions" field)

## Evidence Supporting the Measure

### Type of Evidence Supporting the Criterion of Quality for the Measure

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

### Additional Information Supporting Need for the Measure

Unspecified

## Extent of Measure Testing

Unspecified

## State of Use of the Measure

### State of Use

Current routine use

### Current Use

not defined yet

## Application of the Measure in its Current Use

### Measurement Setting

Hospital Inpatient

Intensive Care Units

Transition

### Type of Care Coordination

Coordination between providers and patient/caregiver

Coordination within a provider team/site

### Professionals Involved in Delivery of Health Services

not defined yet

### Least Aggregated Level of Services Delivery Addressed

Single Health Care Delivery or Public Health Organizations

### Statement of Acceptable Minimum Sample Size

Unspecified

### Target Population Age

Age greater than or equal to 18 years

### Target Population Gender

Either male or female

# National Strategy for Quality Improvement in Health Care

## National Quality Strategy Aim

Better Care

## National Quality Strategy Priority

Effective Communication and Care Coordination

Person- and Family-centered Care

Prevention and Treatment of Leading Causes of Mortality

# Institute of Medicine (IOM) National Health Care Quality Report Categories

## IOM Care Need

End of Life Care

## IOM Domain

Effectiveness

Patient-centeredness

# Data Collection for the Measure

## Case Finding Period

Unspecified

## Denominator Sampling Frame

Patients associated with provider

## Denominator (Index) Event or Characteristic

Institutionalization

Therapeutic Intervention

## Denominator Time Window

not defined yet

## Denominator Inclusions/Exclusions

### Inclusions

Number of indications for total limitation of life support

#### Note:

Both withdrawing and withholding therapeutic measures are considered limitation of life support.

Population: All patients admitted to the intensive care unit (ICU) in whom life support is limited during the period reviewed.

### Exclusions

Decision not to admit the patient to the ICU, because this does not generally allow the team to deliberate the decision

In exceptional cases, the decision to limit life support can be taken individually.

## Exclusions/Exceptions

not defined yet

## Numerator Inclusions/Exclusions

### Inclusions

Number of indications to limit life support that fulfill the criteria

#### Note:

The following are considered essential for the indication:

Based on the best scientific evidence available

Taking the patient's wishes into consideration as well as advance health directives

Consensus among the healthcare team

Informing and consulting with the family

All of the above must be stated in the clinical records (the decision to limit life support, its clinical basis, whether reached by consensus, whether the family was informed, and whether the patient's previous instructions were taken into consideration).

### Exclusions

Unspecified

## Numerator Search Strategy

Institutionalization

## Data Source

Electronic health/medical record

Paper medical record

## Type of Health State

Does not apply to this measure

## Instruments Used and/or Associated with the Measure

Unspecified

# Computation of the Measure

## Measure Specifies Disaggregation

Does not apply to this measure

## Scoring

Rate/Proportion

## Interpretation of Score

Desired value is a higher score

## Allowance for Patient or Population Factors

not defined yet

## Standard of Comparison

not defined yet

## Prescriptive Standard

Standard: 100%

## Evidence for Prescriptive Standard

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# Identifying Information

## Original Title

Limiting life support.

## Measure Collection Name

Quality Indicators in Critically Ill Patients

## Measure Set Name

Bioethics

## Submitter

Spanish Society of Intensive and Critical Care and Units Coronary - Clinical Specialty Collaboration

## Developer

Spanish Society of Intensive and Critical Care and Units Coronary - Clinical Specialty Collaboration

## Funding Source(s)

Boehringer Laboratories

## Composition of the Group that Developed the Measure

Work Group for Bioethics Work Group

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## Financial Disclosures/Other Potential Conflicts of Interest

Unspecified

## Adaptation

This measure was not adapted from another source.

## Date of Most Current Version in NQMC

2011 Mar

## Measure Maintenance

Unspecified

## Date of Next Anticipated Revision

2016 Jul

## Measure Status

This is the current release of the measure.

The measure developer reaffirmed the currency of this measure in May 2016.

## Measure Availability

Source available in [English](#)  and [Spanish](#)  from the Spanish Society of Intensive and Critical Care and Units Coronary (SEMICYUC) Web site.

For more information, contact SEMICYUC at Paseo de la Reina Cristina, 36, 4<sup>o</sup> D, Madrid, Spain; Phone: +34-91-502-12-13; Fax: +34-91-502-12-14; Web site: [www.semicyuc.org](http://www.semicyuc.org) ; E-mail: [secretaria@semicyuc.org](mailto:secretaria@semicyuc.org).

## NQMC Status

This NQMC summary was completed by ECRI Institute on March 19, 2014. The information was verified by the measure developer on April 25, 2014.

The information was reaffirmed by the measure developer on May 10, 2016.

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## Production

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